

# CLAIMS ONLY

Application Number

10770737

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
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12						
13						
14						
15						
16						
17						
18						
19						
20						
21	1					
22		1				
23						
24						
25						
26		1				
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47						
48						
49						
50						
Total Indep	6					
Total Depend		1				
Total Claims	7					

  

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	Indep	Depend	Indep	Depend	Indep	Depend
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99						
100						
Total Indep						
Total Depend						
Total Claims						